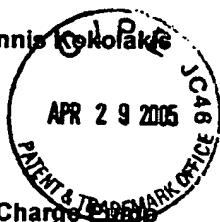


TRANSMITTAL FORM

Attorney Docket No. *JFW*

2572P

In re the application Ioannis Kokolakis
 Serial No: 10/622,330
 Filed: July 17, 2003
 For: Current Steering Charge



Confirmation No: 4830

Group Art Unit: 2817

Examiner: Chang, Joseph

Fee easy

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input type="checkbox"/>	<input type="checkbox"/> After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Notice of Appeal
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Brief
<input type="checkbox"/>	<input type="checkbox"/> Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	<input type="checkbox"/> (X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input checked="" type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Other Enclosure(s) (please identify below):
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer		
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for one month(s), from April 9, 2005 to May 8, 2005.			
<input type="checkbox"/>	<input type="checkbox"/> Executed Declaration by Inventor(s)				

CLAIMS

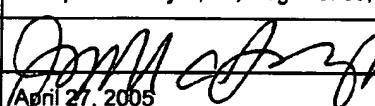
FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	28	33	0	\$ 50.00	\$ 0.00
Independent Claims	5	4	1	\$200.00	\$ 200.00
				Total Fees	\$ 200.00

METHOD OF PAYMENT

05/17/2005	<input checked="" type="checkbox"/>	Check no. 1086302 in the amount of \$ 320.00 is enclosed for payment of one month extension and extra independent claim fee.
01 FC:1	<input type="checkbox"/>	Charge \$ 0 DA to Deposit Account No. _____ (Account Holder Name) for payment of fees.
	<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. 02-2120 (Sawyer Law Group)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Attorney Name Joseph A. Sawyer, Jr., Reg. No. 30,801

Signature 

Date April 27, 2005

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on April 27, 2005

Type or printed name Irena Nikoleva

Signature 